

July 20, 2018

The Honorable Greg Walden  
Chairman  
Committee on Energy and Commerce  
U.S. House  
Washington, DC 20515

The Honorable Gregg Harper  
Ranking Member  
Subcommittee on Oversight and Investigations  
U.S. House  
Washington, DC 20515

Chairman Walden and Ranking Member Harper:

On behalf of our 99 community hospital members, the Washington State Hospital Association (WSHA) appreciates the opportunity to provide information about sexual assault forensic evidence collection and hospital services provided to patients in Washington State.

**WSHA supports access to sexual assault forensic evidence collection by trained medical providers**

As a membership organization, WSHA advocates for and supports our members in achieving their missions and improving the health of their communities. WSHA actively supports our member hospitals to provide sexual assault forensic evidence collection through well-trained providers as part of a high-quality, sustainable service. Along with our members, WSHA works with advocacy groups, legislators, law enforcement agencies, prosecutors, state agencies, universities, counties, and cities to improve the availability and quality of services for sexual assault survivors in Washington State. WSHA supports and partners with the University of Washington Harborview Center for Sexual Assault and Traumatic Stress, a hospital-based center that provides Sexual Assault Nurse Examiner (SANE) training statewide, to increase SANE training availability. In addition, WSHA staff serve on the Sexual Assault Forensic Examination Best Practices Task Force, a statewide legislatively created task force.

**Hospitals face ongoing challenges in hiring and retaining SANEs**

Most hospitals in Washington State provide sexual assault forensic evidence exams and collection via trained medical providers, including Sexual Assault Nurse Examiners (SANEs). However, there are significant barriers to providing sexual assault forensic evidence collection services. Access to this service can be limited by provider availability. Due to staffing availability, some hospitals are not able to provide SANE services or provide this service on a 24/7, 365-day basis. In such cases, patients are screened and stabilized and then may be transferred or referred to a hospital that provides this service.

There is significant cost and time associated with specialized training such as SANE training. This can be prohibitive, especially for small, rural, and remote hospitals that already struggle to find sufficient staff members. In addition, this work requires specialized skill and aptitude, making it challenging to retain specially trained providers. Because the work requires advanced skills, some of the SANE providers are also the best nurses to assist in the case of trauma or life-threatening illness. They will first assist with life-saving treatment.

Some providers find they do not want to provide the service or experience vicarious trauma when they do. In addition, some providers decide not to continue to provide forensic evidence collection because of fear of testifying in court proceedings or after having a bad experience before a court.

Hospitals with low or sporadic case volumes note that it is very difficult to maintain certification requirements, proficiency, and expertise for specially trained staff to provide sexual assault forensic evidence collection. One rural hospital noted that in the past ten years, one sexual assault survivor has come to the hospital seeking a forensic exam. With such low patient volume, it is difficult for specially trained staff to remain competent to perform these forensic exams.

#### **WSHA responses to committee questions**

Below are responses to the questions posed in the committee's June 21 letter. Where appropriate, we have provided additional background or contextual information to provide a more comprehensive picture of the work of WSHA and others regarding the availability of sexual assault forensic exams at hospitals across Washington State.

1. *How many hospitals in Washington is Washington State Hospital Association aware of that have a SANE program?*

WSHA surveyed our community hospital members in order to provide accurate information to the committee. The survey did not include specialty hospitals, such as psychiatric and rehabilitation hospitals. WSHA surveyed 90 community hospitals and received information for 88 hospitals. According to this information, 68 hospitals in Washington State provide sexual assault forensic exams and 22 hospitals do not provide these exams.

Some hospitals provide sexual assault forensic exams at all times. At other hospitals, the sexual assault forensic exams are available if a SANE or other trained staff member is available. Some hospitals employ SANE-trained staff, some contract with another entity to provide SANEs, and some have other trained staff perform exams. Because pediatric sexual assault exams require a particularly high level of expertise, most hospitals transfer pediatric patients (minors under the age of 12 or 14) to a location that specializes in serving these patients.

2. *Does Washington State Hospital Association maintain a database of hospitals and/or other entities across Washington that have a SANE program? If so, is that database publicly available?*

The University of Washington Harborview Center for Sexual Assault and Traumatic Stress, a member of the Washington State Hospital Association and the trainer for SANE providers in our state, maintains a publicly available list of facilities by county that provide sexual assault forensic evidence exams. The website is: <http://depts.washington.edu/hcsats/ch/index.html> and the search function [is available here](#).

WSHA surveys members from time to time regarding sexual assault forensic exam availability but does not maintain an up-to-date database.

3. *What steps, if any, has Washington State Hospital Association taken to increase access or address the lack of access to SAFE kits in hospitals across Washington? Does WSHA partner with law enforcement agencies in any capacity to provide access to SAFE kits?*

Access concerns in Washington State focus on access to trained medical providers who are available to conduct sexual assault forensic evidence exams and collection. There is not a lack of availability of the

kits themselves. However, adequate law enforcement resources to track, analyze, and store the kits is a barrier.

Below is information on WSHA's work to increase access to trained providers who provide sexual assault forensic evidence exams and collection. Of note, most hospitals that provide sexual assault forensic evidence kit collection in Washington State use the TriTech Sexual Assault Evidence Kit Re-WA 3, which meets the requirements of the Washington State Patrol Crime Lab and the professional guidelines set forth by University of Washington Harborview Center for Sexual Assault and Traumatic Stress.

WSHA actively supports work that promotes access to sexual assault forensic exams, SANE services, and forensic evidence kits. Recent examples include:

- **Statewide sexual assault kit tracking system.** Washington State [House Bill 2530](#) (passed in 2016) established a statewide tracking system for sexual assault forensic evidence kits. WSHA actively supported the establishment of the tracking system and is currently assisting the Washington State Patrol to train hospital staff to use the tracking system. The Washington State Patrol is bringing the tracking system online by region, with the goal of having the system operational by the end of the year. More information on the tracking system [is available here](#).
- **Sexual assault kit testing and establishment of a statewide task force.** WSHA supported the passage of Washington State [House Bill 1068](#) (passed in 2015), mandating the testing of reported, but untested sexual assault examination kits in Washington State. The bill also established a statewide task force on sexual assault forensic examination best practices. The resulting Sexual Assault Forensic Examination Best Practices Task Force is a statewide task force with representatives from hospitals, law enforcement agencies, survivor advocates, prosecuting and defense counsel, universities and colleges, and legislators. Zosia Stanley, Government Affairs Director at WSHA, has served on the Task Force since it was established in 2015. Information about the Task Force, including annual reports, [is available here](#).
- **Studies on SANE availability.** Washington State [House Bill 2711](#) (passed in 2016) directed the state Office of Crime Victims Advocacy (OCVA) to study the availability of SANEs in Washington State. WSHA assisted OCVA with this work and the final study [is available here](#). According to the 2016 study, there are over 200 trained SANEs in Washington State. Washington State [House Bill 2101](#) (passed in 2018) directed the Office of Crime Victims Advocacy (OCVA) to build on the 2015 report and identify best practices to increase patient access to SANEs and to increase statewide access to SANE training. WSHA is assisting OCVA on this study.
- **Funding for SANE training.** The University of Washington Harborview Center for Sexual Assault and Traumatic Stress (HCSATS) provides SANE training in Washington State. WSHA works closely with HCSATS to support funding for SANE training and to publicize training opportunities to WSHA members. HCSATS also provides and publicizes professional guidelines to be used in sexual assault examinations and evidence collection. [These guidelines are available here](#).
- **Coordination with law enforcement.** WSHA works with the Washington Association of Sheriffs and Police Chiefs, the Washington State Patrol, the Washington State Crime Laboratory, and the Washington State Office of the Attorney General to address access to forensic exams and kits and other areas including appropriate storage and retention of such kits.

- **Accurate count of untested sexual assault kits.** The Washington State Office of the Attorney General is working to inventory, test, and help investigate backlogged sexual assault forensic evidence kits as part of a grant from the U.S. Department of Justice. WSHA is assisting the Office of the Attorney General to count kits stored in hospitals.
4. *What challenges has Washington State Hospital Association identified that hospitals face in providing access to these services? How is Washington State Hospital Association working with your hospitals to address those challenges?*

As noted above, there can be significant barriers to providing sexual assault forensic evidence collection services and access to this service can be limited by provider availability.

- **Cost and time of training.** Specialty sexual assault forensic evidence collection training (such as SANE training) requires substantial time, the cost can be burdensome, and training often requires significant travel to a training site. For small, rural, and remote hospitals it can be challenging to cover patient care needs when a staff member is away for a multiple day training.
  - **Provider interest and retention.** Staff may be uninterested or unwilling to take training or provide sexual assault forensic evidence exams. The service requires a specialized capacity. Some providers may be willing to collect exams but find the work difficult or burn out and leave a hospital's employment or seek other work within the hospital.
  - **Maintaining skills and competency.** Hospitals with low or sporadic case volumes note that it can be difficult to provide staff with sufficient experience and practice to remain competent and confident. This is particularly important because the results of the exam often become evidence in a criminal matter and any mistake can taint the evidence and ruin the case.
  - **Continuous availability.** In some hospitals there are a limited number of specially trained providers and they are not always available or on call. If a trained provider is not available, the patient may be transferred or referred to another hospital. In some hospitals the specially trained staff are also the most experienced. Especially in small hospitals, if these staff are needed to treat trauma or accident patients, the staff are not available in a timely manner to provide sexual assault examinations.
  - **Court involvement.** Hospital providers do not have experience or expertise with court processes, particularly ones where a defense strategy is to question motives and competence. Many describe the experience as grueling, lengthy and demeaning. They often do not wish to repeat it.
5. *For hospitals in Washington that do not have a SANE program, does Washington State Hospital Association provide guidance, standards, or best practices on how to treat patients that come to the hospital seeking a SAFE kit? If so, what procedures are recommended? If so, please provide copies of any such guidance, standards, or best practices. Do the procedures vary for hospitals in rural and urban areas, or based on the availability of local alternatives, such as a rape crisis center?*

In our role as an association, WSHA does not currently provide guidance, standards, or best practices on how to treat patients that come to the hospital seeking sexual assault forensic evidence kit collection because this expertise and training exists among our membership. WSHA does provide these

recommended resources for members, including the University of Washington Harborview Center for Sexual Assault and Traumatic Stress and the Washington Coalition of Sexual Assault Programs. We also work with Washington Coalition of Sexual Assault Programs to help hospitals coordinate with the local county sexual assault program in each county.

The availability of sexual assault forensic exams varies by region in Washington State. In rural areas of Washington State, including the far west, east, and north of the state, residents travel long distances to regional hubs for a variety of services, including health care. Some rural hospitals may not have the resources and capacity to provide sexual assault forensic exams, but all hospitals do provide medical care, stabilization, and referral to all patients. In addition, hospitals work with local county sexual assault programs to connect patients with local resources and supports

WSHA appreciates the Committee's interest in this important area. We look forward to hearing more about the work being done at a federal level. Please direct questions to me or to WSHA's policy lead on this subject, Zosia Stanley, Government Affairs Director, at [zosias@wsa.org](mailto:zosias@wsa.org).

Sincerely,

A handwritten signature in cursive script that reads "Cassie Sauer". The ink is dark and the signature is fluid, with a large loop at the end of the last name.

Cassie Sauer  
President and CEO  
Washington State Hospital Association